

CITY OF CATHEDRAL CITY

FINANCE DEPARTMENT 68-700 AVENIDA LALO GUERRERO CATHEDRAL CITY, CA 92234

WWW.CATHEDRALCITY.GOV

PHONE: 760-202-2406

HOMEOWNER APPLICATION FOR VACATION RENTAL PERMIT

TITLE 3 CHAPTER 24 OF THE CATHEDRAL CITY MUNICIPAL CODE REQUIRES A VALID REGISTRATION CERTIFICATE FOR ALL VACATION RENTAL UNITS RENTED 30 CONSECUTIVE DAYS OR LESS.

THE ANNUAL REGISTRATION FEE OF \$60 (PER UNIT) MUST ACCOMPANY THIS APPLICATION.

OWNER NAME:	
MAILING ADDRESS:	
CITY, STATE, ZIP:	
PHONE #:	
EMAIL ADDRESS:	
VACATION RENTA	L PROPERTY INFORMATION (ATTACH ADDITIONAL SHEETS AS NECESSARY)
PROPERTY ADDRESS:	
PROPERTY PHONE NUMB	ER:
VRBO OR OTHER WEBSTIE	LISTING #:
HOA, IF APPLICABLE:	
NUMBER OF BEDROOMS:	
	LIZE A MANAGEMENT COMPANY AND RENT DIRECTLY BY OWNER, YOU MUST AUTHORIZE AL CONTACT PERSON WHO IS AVAILABLE 24/7/365 TO ANSWER AND RESPOND TO HOTLINE
LOCAL EMERGENCY CONT	ACT PERSON:
EMERGENCY CONTACT PE	RSON PHONE NUMBER:
I DECLARE UNDER PE	NALTY THAT THIS INFORMATION IS, TO THE BEST OF MY KNOWLEDGE, TRUE, AND CORRECT.
APPLICATION BY:	
	PLEASE PRINT
SIGNATURE:	
DATE:	
	FOR CITY USE ONLY
PERMIT NUMBER: DATE PROCESSED:	
DATE PROCESSED:	BUSINESS LICENSE NUMBER: